

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000190054

Entity Name: JAIME'S ADULT DAY CENTERS, LLC

Current Principal Place of Business:

18950 N DALE MABRY
LUTZ, FL 33548

Current Mailing Address:

18950 N DALE MABRY
LUTZ, FL 33548 US

FEI Number: 47-5586356

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HINES, ROBERT D
1312 W FLETCHER AVE STE B
TAMPA, FL 33612 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT HINES

02/12/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GODDARD, JULIE M
Address 18950 N DALE MABRY
City-State-Zip: LUTZ FL 33548

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIE GODDARD

MGR

02/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date